E-QUAL Learning Collaboratives

Sepsis | Opioid | Stroke

The E-QUAL team recognizes your pivotal role on the front-lines of the COVID-19 response effort! We thank you for your service and value your continued participation in E-QUAL during this stressful time.

Due to the increased COVID-19 response efforts for emergency departments, the E-QUAL team is extending enrollement deadlines for 2020 collaboratives (see new deadlines below).

2020 Enrollment Extended!

- Stroke Wave I - July 12

Enroll now through the E-QUAL Portal (left).

Currently enrolled sites may also enrolled through the E-QUAL Portal. You will be prompted within the portal. Look for a green bar at the top of your portal page and follow the instructions.

Questions?
Contact the E-QUAL Team
Use the Portal Access Guide
MIPS 2019 Data Submission Period Has Closed; You Can Now Review Preliminary MIPS Performance Feedback Data

The data submission period for the 2019 Merit-based Incentive Payment System (MIPS) closed on April 30, 2020. The Centers for Medicare & Medicaid Services (CMS) is currently in the process of reviewing the data submitted.

For the MIPS 2019 performance period, CMS added flexibilities to allow the healthcare delivery system to focus on the 2019 Novel Coronavirus (COVID-19) response. The automatic extreme and uncontrollable circumstances policy was extended to all MIPS eligible clinicians. MIPS eligible clinicians who were not able to submit any 2019 MIPS data by April 30, 2020 will receive a neutral payment adjustment for the 2021 MIPS payment year.

Preliminary Feedback on 2019 MIPS Data Submission Now Available
If you submitted data through the Quality Payment Program, you are now able to review your 2019 MIPS preliminary performance feedback data. Please keep in mind that this is not your final score or feedback.

Your final score and feedback will be available in July 2020. Between now and July, your score could change based on the following:

- All-Cause Readmission Measure for the Quality performance category
- Claims measures to include the 60-day run out period
- CAHPS for MIPS Survey results
- Reweighting based on COVID-19 Extreme and Uncontrollable Circumstances Applications (submitted in April)
- Quality and Cost performance category scores from facility-based measurement
- Improvement Study participation and results
- Creation of performance period benchmarks for Quality measures that didn’t have a historical benchmark

You will be able to access preliminary and final feedback with the same HCQIS Authorization Roles and Profile (HARP) credentials that allowed you to submit and view your data during the submission period. Don't have a HARP account? Start the process now! Refer to QPP Access User Guide and this video for step-by-step instructions.
2020 is well on its way, but not without new challenges:

5 items to focus on...

1. Check your 2020 MIPS eligibility status [here](#). 2020 APM participation information is now available.

2. Review your MIPS Measures and Activities for 2020: Verify that your 2019 plan is valid for 2020. Performance Category measures and activities can be added, changed or retired each year. This could modify how you participate in MIPS year over year. CMS has updated the search feature on the QPP website to include all measures and activities for 2020, including new or revised Quality Specialty Measure Sets. Click [here](#) to review.

3. Quality Performance Category: Review your measure workflow and coding/specifications. With changes in measure reporting each year it is important to verify with your vendor that your team is following the correct workflows for gathering data. If you report via Medicare Part B claims you will want to review the measure specifications for any coding changes. Verify the specifications have not changed and continue collecting data. The Quality category is the only performance category that currently requires a full year submission. You will find the 2020 Quality Measures and supporting resources [here](#).

4. Run your reports: Verify that you are following the proper workflow to collect your data. This is a common issue in the Promoting Interoperability Category.

5. Stay on top of 2020 MIPS news: During this time there has been a multitude of information coming out. IPRO is here to help. We have scheduled a webinar for September of this year to address 2020 and any flexibilities CMS may allow due to the COVID-19 crisis. You can register for that webinar [here](#).

And don't forget to always check the map: [QPP Timeline and Important Deadlines](#)

2021 MIPS Value Pathways
CMS has finalized MIPS Value Pathways (MVPs), a participation framework that will begin with the 2021 performance period.

Watch this video to learn more about the MVPs framework, and how it will help to improve the Merit-based Incentive Payment System (MIPS) and make the program more meaningful to clinicians and patients.

Throughout 2020 IPRO will be providing educational events, such as our Office Hours, to discuss this new framework and prepare you for the 2021 performance year. You can always find an up to date listing of these events on our QPP Support Center Education Page: https://ipro.org/for-providers/medicare-qpp/ipro-present.

In the meantime, CMS has released resources that outline the MVP framework. We suggest you review each carefully and let us know if you have any questions.

- **MIPS Value Pathways Diagrams**: This zip file contains three visual diagrams of the proposed MIPS MVPs framework, including an MVP example for Diabetes Prevention and Treatment and an example for Major Surgery.

- **MIPS Value Pathways Overview Fact Sheet**: Provides an overview of the MIPS MVPs participation framework that was finalized in the 2020 Quality Payment Program final rule.

- **MIPS Value Pathways (MVPs) Overview**: This video provides an overview of the MIPS MVPs participation framework that was finalized in the 2020 Quality Payment Program final rule and will begin in 2021 performance year.

CMS has a wealth of resources that you can find in the QPP Resource Library.

- **2019 30-Day All-Cause Hospital Readmission Measure**: Provides details on the measure specifications for the 30-Day All-Cause Hospital Readmission Measure.

- **2020 APM Quality Scoring Resources**: The purpose of this document is to describe the APM Scoring Standard for the quality performance category for MIPS APMs. The quality performance category is the first of four categories used for the Quality Payment Program performance assessment. Here, we aim to: (1) present the regulatory guidance for performance year 2020 APM scoring; and (2) provide a
standardized APM scoring methodology for MIPS APMs that reflects the updated procedures for performance year 2020.

- **2020 Registration Guide for the CMS Web Interface and CAHPS for MIPS Survey:** Registration guide for those who want to submit quality measures through the CMS Web Interface in 2020 and/or administer the 2020 CAHPS for MIPS Survey.
- **2020 Call for Measures and Activities:** Provides details about the 2020 Annual Call for Measures and Activities process for submitting measures and improvement activities for possible inclusion in the Quality Payment Program (QPP).

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**Quality Tip of the Month**

“When attempting to use alternative medications with patients share with them the idea behind non-opioid multimodal analgesia. Their only prior experience in the ED with pain may have resulted in them getting opioids. They may have certain expectations. But with education and reassurance most patients are open to trying something new especially if it means they will have a reduction in their pain. What I say, “for your muscular pain I want to give you a combination of different medications, that alone are not all that strong, but together work really well to lower your pain. They actually treat the source of your pain instead of masking it. The studies we are doing on pain show these combinations work really well and are better than opioid pain medication for muscle sprains and strain.”
View the FAQ page | Download the Portal Access Guide

If you have questions regarding your collaborative, please be sure to reference these resources. If your site's questions are not answered, please reach out to the E-QUAL team.

Click here if you are having trouble viewing this message.